

AMENDED IN SENATE JUNE 29, 2010

AMENDED IN SENATE MAY 17, 2010

AMENDED IN SENATE APRIL 28, 2010

AMENDED IN SENATE SEPTEMBER 2, 2009

AMENDED IN ASSEMBLY JUNE 2, 2009

AMENDED IN ASSEMBLY APRIL 16, 2009

CALIFORNIA LEGISLATURE—2009—10 REGULAR SESSION

## ASSEMBLY BILL

**No. 1570**

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**Introduced by Assembly Member Salas**

March 16, 2009

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~~An act to add Article 3.7 (commencing with Section 1660) to Chapter 4 of Division 2 of, and to repeal Section 1660.7 of, An act to add and repeal Section 1620 of the Business and Professions Code, relating to dentistry.~~

### LEGISLATIVE COUNSEL'S DIGEST

AB 1570, as amended, Salas. Malpractice insurance: volunteer dentists.

Under existing law, the Dental Practice Act, the Dental-board *Board* of California is responsible for the licensure and regulation of dentists. Licensure fees imposed upon dentists are deposited into the State Dentistry Fund for the purposes of administering the act and are subject to appropriation by the Legislature.

~~This bill would create the Volunteer Insured Dentists Program, administered by the board, to provide specified malpractice insurance coverage to volunteer dentists providing uncompensated care to~~

~~low-income patients pursuant to a contract with a qualified health care entity, as defined. The bill would provide unspecified funding for the program from the State Dentistry Fund for a limited period of time. The bill would require annual reports to the Legislature until January 1, 2015 require the board, in conjunction with the Health Professions Education Foundation, to study the issue of its providing malpractice insurance for dentists who provide these services and report its findings to the Legislature on or before January 1, 2012. The bill would make implementation of its provisions contingent on an appropriation of funds for that purpose, as specified.~~

Vote: majority. Appropriation: no. Fiscal committee: yes.  
State-mandated local program: no.

*The people of the State of California do enact as follows:*

1     SECTION 1. Section 1620 is added to the Business and  
2     Professions Code, to read:  
3     1620. (a) The board, in conjunction with the Health  
4     Professions Education Foundation, shall study the issue of its  
5     providing malpractice insurance to dentists who provide voluntary,  
6     unpaid services, and report its findings to the Legislature on or  
7     before January 1, 2012.  
8     (b) The report shall include, but not be limited to, a discussion  
9     of the following items:  
10    (1) The cost of administering a program to provide malpractice  
11    insurance to the dentists and the process for administering the  
12    program.  
13    (2) The options for providing malpractice insurance to the  
14    dentists and for funding the coverage.  
15    (c) This section shall be implemented only after the Legislature  
16    has made an appropriation from the State Dentistry Fund to fund  
17    the study.  
18    (d) (1) A report to be submitted pursuant to subdivision (a)  
19    shall be submitted in compliance with Section 9795 of the  
20    Government Code.  
21    (2) Pursuant to Section 10231.5 of the Government Code, this  
22    section is repealed on January 1, 2016.  
23    SECTION 1. ~~Article 3.7 (commencing with Section 1660) is~~  
24    ~~added to Chapter 4 of Division 2 of the Business and Professions~~  
25    ~~Code, to read:~~

Article 3.7. ~~Volunteer Insured Dentists Program~~

~~1660. This article shall be known and may be cited as the Volunteer Insured Dentists (VID) Act, which authorizes the creation and implementation of the Volunteer Insured Dentists (VID) Program.~~

~~1660.1. For purposes of this article, the following definitions shall apply:~~

~~(a) "Licensee" means a licensed dentist who is engaged in the practice of dentistry under the jurisdiction of the board.~~

~~(b) "Low-income patient" means a person who is without dental coverage and whose family income does not exceed 200 percent of the federal poverty level, as defined annually by the federal Office of Management and Budget.~~

~~(c) "Qualified health care entity" means a county health department or clinic owned and operated by a governmental entity.~~

~~(d) "VID Program" is the Volunteer Insured Dentists Program.~~

~~(e) "Voluntary service agreement" means an agreement executed pursuant to this article between the board, a licensee, and a qualified health care entity that authorizes the qualified health care entity to enter into a voluntary service contract with the licensee.~~

~~(f) "Voluntary service application" means the written application developed by the board that a licensee must complete and submit in order to be considered for participation in the VID Program.~~

~~(g) "Voluntary service contract" means an agreement executed pursuant to this article between a licensee and a qualified health care entity that authorizes the licensee to deliver dental services to low-income patients as an agent of the qualified health care entity on a volunteer, uncompensated basis.~~

~~(h) "Volunteer dentist" means a licensee who volunteers to provide dental services, as described in Section 1660.3, to a low-income patient, with no monetary or material compensation.~~

~~1660.2. (a) A licensee who wants to provide voluntary, uncompensated care to low-income patients, but who does not have professional liability insurance that would include insurance coverage for premiums, defense, and indemnity costs for any claims arising from voluntary and uncompensated care, may submit a voluntary service application to the board for coverage under the VID Program.~~

~~(b) A licensee who submits an application for a waiver of renewal licensing fees under subdivision (a) of Section 1716.1 and who also submits a voluntary service application shall be simultaneously assessed by the board for eligibility to receive professional liability insurance coverage for premiums, defense, and indemnity costs through the VID Program.~~

~~(c) A licensee who has standard professional liability insurance coverage for his or her regular practice but who is not covered for volunteer service may submit a voluntary service application to participate in the VID Program. In conjunction with the voluntary service application, the licensee shall submit verification from his or her professional liability insurance carrier that voluntary, uncompensated care is not covered by his or her existing professional liability insurance policy.~~

~~(d) The board shall review the voluntary service application to determine if the applicant meets the criteria for VID Program participation. These criteria shall include both of the following:~~

~~(1) Holding an active license in good standing to practice dentistry in the State of California.~~

~~(2) No record of disciplinary action by the board or any other regulatory board.~~

~~(e) Continued eligibility for the VID Program shall be reassessed by the board during each license renewal cycle.~~

~~1660.3. (a) Licensees approved by the board for participation in the VID Program may enter into a voluntary service agreement with the board and a qualified health care entity that acknowledges the terms of the VID Program and transfers responsibility from the volunteer dentist to the state for professional liability insurance, including premiums, defense, and indemnity costs, for voluntary, uncompensated dental care that is provided in accordance with an executed and signed voluntary service contract between the volunteer dentist and the qualified health care entity and that complies with the terms of the VID Program.~~

~~(b) The voluntary service contract between the volunteer dentist and the qualified health care entity shall include all of the following provisions:~~

~~(1) All care provided shall be both voluntary and uncompensated and shall be provided to low-income patients.~~

~~(2) Patient selection and initial referral shall be made solely by the qualified health care entity and the volunteer dentist shall accept~~

1 all-referred patients except as otherwise allowed by law. However,  
2 the number of patients that must be accepted may be limited by  
3 the voluntary service contract.

4 (3) ~~The qualified health care entity shall have access to the~~  
5 ~~patient records of the volunteer dentist delivering services under~~  
6 ~~the voluntary service contract.~~

7 (4) ~~The volunteer dentist shall be subject to supervision by the~~  
8 ~~qualified health care entity's standard peer review process and all~~  
9 ~~related laws regarding peer review, including, but not limited to,~~  
10 ~~the filing of reports pursuant to Section 805.~~

11 (5) ~~The qualified health care entity shall utilize a quality~~  
12 ~~assurance program to monitor services delivered by the volunteer~~  
13 ~~dentist under the voluntary services contract.~~

14 (6) ~~The right to dismiss or terminate a volunteer dentist~~  
15 ~~delivering services under the voluntary service contract shall be~~  
16 ~~retained by the qualified health care entity. If the volunteer services~~  
17 ~~contract is terminated, the qualified health care entity shall notify~~  
18 ~~the VID Program in writing within five days.~~

19 1660.4. ~~The fact that a volunteer dentist is insured under the~~  
20 ~~VID Program in relation to particular dental services rendered~~  
21 ~~shall not operate to change or affect the laws applicable to any~~  
22 ~~claims arising from or related to those dental services. All laws~~  
23 ~~applicable to a claim remain the same regardless of whether a~~  
24 ~~licensee is insured through the VID Program.~~

25 1660.5. ~~If a volunteer dentist covered by the VID Program~~  
26 ~~receives notice or otherwise obtains knowledge that a claim of~~  
27 ~~professional negligence has been or may be filed, the dentist shall~~  
28 ~~immediately notify the VID Program or the contracted liability~~  
29 ~~carrier.~~

30 1660.6. ~~All costs for administering the VID Program, including~~  
31 ~~the cost of professional liability insurance for premiums, defense,~~  
32 ~~and indemnity coverage for program participants, shall be paid for~~  
33 ~~from the State Dentistry Fund, in an amount not to exceed \_\_\_\_~~  
34 ~~dollars (\$\_\_\_\_) per year.~~

35 1660.7. (a) ~~The board shall report annually to the Legislature~~  
36 ~~summarizing the efficacy of access and treatment outcomes with~~  
37 ~~respect to providing dental services for low-income patients~~  
38 ~~pursuant to this article. The report shall include the numbers of~~  
39 ~~injuries and deaths reported, claims statistics for all care rendered~~  
40 ~~under the VID Program, including the total of all premiums paid,~~

1 the number of claims made for each year of the VID Program, the  
2 amount of all indemnity payments made, the cost of defense  
3 provided, and administration costs associated with all claims made  
4 against volunteer dentists arising from voluntary and  
5 uncompensated care provided under the VID Program.

6 (b) (1) A report to be submitted pursuant to subdivision (a)  
7 shall be submitted in compliance with Section 9795 of the  
8 Government Code.

9 (2) Pursuant to Section 10231.5 of the Government Code, this  
10 section is repealed on January 1, 2015.

11 1660.8. This article shall remain operative until January 1,  
12 2016, or until another viable source of funding is identified and  
13 adopted, whichever occurs first.